

Special Alert

Subject Line: Special Alert –ACIP recommends that LAIV (“nasal spray” flu vaccine) should not be used in 2016 – 2017 flu season

Dear Colleagues,

On Wednesday afternoon we received the following announcement from the CDC:

CDC’s Advisory Committee on Immunization Practices (ACIP) voted in favor of an interim recommendation that live attenuated influenza vaccine (LAIV), also known as the “nasal spray” flu vaccine, should not be used during the 2016-2017 flu season. ACIP continues to recommend annual flu vaccination, with either the inactivated influenza vaccine (IIV) or recombinant influenza vaccine (RIV) for everyone 6 months and older.

We will work with you in the coming days and weeks to address potential programmatic challenges. We are fortunate that the U.S. vaccine market is now so robust. Manufacturer projections indicate supply will still be adequate for the U.S. market, though providers may need to check more than one supplier or purchase a flu vaccine brand other than the one they normally select.

The decision was based on vaccine effectiveness data for LAIV during the 2015 – 2016 flu season that was presented to ACIP on Wednesday. This data was summarized as “During the 2015-2016 season, VE data provided by the U.S. Flu VE Network indicated that LAIV offered no significant protection against the predominant flu virus [i.e., influenza A (H1N1)pdm09] among study participants age 2 through 17 years of age.”

Since receiving the initial announcement, we began immediately seeking additional information and assessing the impact on the upcoming influenza season in Kansas. On Thursday we were notified that we are being directed by CDC to replace the 26,000 doses of LAIV with IIV and will be provided a template to do this by July 1st. As we do this, we will be focused on diversifying our order as much as possible to try and avoid any single presentation being short on availability.

LAIV accounts for about 8% of the total flu vaccine market in the United States. We have been told there will be enough IIV to meet the loss of LAIV but it will mean we all have to work together in remaining more flexible in preference of vaccine presentation. As we move forward we will develop policy on vaccine distribution that will be focused on assuring proper vaccine is available for everyone to the best of our ability.

We will continue to update you as this change in availability of vaccine proceeds. We know it is particularly important that our partners have as much information as possible and as early as possible for planning purposes. One issue that many will want to think about at this time is how

this may impact plans for conducting school vaccine clinics as LAIV has been the preferred presentation in many of these clinics.

Finally, we want to emphasize that this is just another small challenge that sometimes happens in the world of vaccines. Because of the many committed and passionate partners, like you, who are committed to immunizing safely and effectively in order to prevent disease, we will get through this. Watch for further updates in the coming weeks.

Phil Griffin

Deputy Director, Bureau of Disease Control and Prevention